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 Jc812 U.S. PTO

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PTO/SB/05 (03-01)

Please type a plus sign (+) inside this box ☐

Approved for use through 10/31/2002 OMB 0651-0032
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	HO-P02102US2
	First Inventor	Suzanne Fuqua
	Title	METHODS AND COMPOSITIONS IN, etc.
	Express Mail Label No.	EU186312592US

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Box Patent Application Commissioner for Patents Washington, DC 20231
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages 120] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the invention - Brief Summary of the invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 9] 5. Oath or Declaration [Total Pages 1] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies ACCOMPANYING APPLICATIONS PARTS 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent 17. <input type="checkbox"/> Other:
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18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.:

Prior application information: Examiner _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	26,271	or <input type="checkbox"/> Correspondence address below
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Name	Melissa L. Sistrunk Fulbright & Jaworski L.L.P.				
Address	1301 McKinney Suite 5100				
City	Houston	State	Texas	Zip Code	77010-3095
Country	USA	Telephone	713.651.3735	Fax	713.651.5246

Name (Print/Type)	Melissa L. Sistrunk	Registration No (Attorney/Agent)	45,579
Signature	<i>Melissa L. Sistrunk</i>	Date	January 18, 2002

Transmittal-New Utility Patent Application I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EU186312592US, in an envelope addressed to: Box Patent Application, Commissioner for Patents, Washington, DC 20231, on the date shown below. Dated: January 18, 2002 Signature: <i>Susan Hunter</i> (Susan Hunter)	
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**FEE TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

☒ Application claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) **1,597.00****Complete if Known**

Application Number	Not Yet Assigned
Filing Date	
First Named Inventor	Suzanne Fuqua
Examiner Name	Not Yet Assigned
Group Art Unit	N/A
Attorney Docket No.	HO-P02102US2

METHOD OF PAYMENT (check all that apply)☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None☐ Deposit Account

Deposit Account Number

06-2375

Deposit Account Name

Fulbright & Jaworski L.L.P.

The Commissioner is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) during the pendency of this application☐ Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		101	740	Utility filing fee	370.00
		106	330	Design filing fee	
		107	510	Plant filing fee	
		108	740	Reissue filing fee	
		114	160	Provisional filing fee	
SUBTOTAL (1)					370.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
63	-20** = 43	x 9.00 =	387.00
Independent Claims	23	-3** = 20	x 42.00 = 840.00
Multiple Dependent			

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		103	18	Claims in excess of 20	
		102	84	Independent claims in excess of 3	
		104	280	Multiple dependent claim, if not paid	
		109	84	** Reissue independent claims over original patent	
		110	18	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					1,227.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	280	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	460	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	740	246	370	Filing a submission after final rejection (37 CFR 1.129(a))	
149	740	249	370	For each additional invention to be examined (37CFR 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other fee (specify)					
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3)					0.00

SUBMITTED BYName (Print/Type) **Melissa L. Sistrunk**Registration No. (Attorney/Agent) **45,579****Complete (if applicable)**Telephone **(713) 651-3735**

Signature

Melissa L. Sistrunk

Date

January 18, 2002**Fee Transmittal**

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Dated: January 18, 2002

Signature: *Susan Hunter* (Susan Hunter)